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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

### Official Form 101

## Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	Yvette	
	your government-issued picture identification (for	First name	First name
	example, your driver's	M.	
	license or passport).	Middle name	Middle name
	Bring your picture	Harrie	
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or		
	maiden names.		-
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9559	

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Del	btor 1 Harris, Yvette M.		Case number (if known)
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live	142 Sundance Rd Matteson, IL 60443-1285	If Debtor 2 lives at a different address:
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Cook	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Deb	otor 1	Harris, Yvette M.				_	Case number(if known)				
Par	t 2:	Tell the Court About Y	our Bankı	ruptcy Ca	S <del>O</del>						
7.	Bank	chapter of the	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.								
	cnoc	sing to file under	Chap	ter 7							
			☐ Chap	ter 11							
			☐ Chap	ter 12							
			☐ Chap	ter 13							
8.	How	you will pay the fee	abo If y pre	out how you our attorne -printed ad	u may pay. Typically, if you are po y is submitting your payment on Idress.	ntire fee when I file my petition. Please check with the clerk's office in your local court for more details nay pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money ord s submitting your payment on your behalf, your attorney may pay with a credit card or check with a ess.					
					r <b>the fee in installments.</b> If you Installments (Official Form 103A)		ion, sign and attach the Application for Individuals to F	Pay The			
			☐ I re	equest that required to refamily size	t my fee be waived (You may roo, waive your fee, and may do so	equest this option only if your inco fee in installmen	on only if you are filing for Chapter 7. By law, a judge nome is less than 150% of the official poverty line that and this one this option, you must fill out the Applicant file it with your petition.	pplies to			
						·	• '				
ba		you filed for	■ No.								
	bank 8 yea	ruptcy within the last	☐ Yes.								
	.,			District		When	Case number				
				District		When	Case number				
				District		When	Case number				
10.		iny bankruptcy cases	■ No			<b></b>					
	a spe this e a bus	ling or being filed by buse who is not filing case with you, or by siness partner, or by filiate?	☐ Yes.								
				Debtor			Relationship to you				
				District		When	Case number, if known				
				Debtor			Relationship to you				
				District		When	Case number, if known				
11.		ou rent your lence?	■ No.	Go to I	ine 12.			···			
	14510	iong f	☐ Yes.	Has yo	eur landlord obtained an eviction	judgment agair	nst you?				
					No. Go to line 12.	,					
					Yes. Fill out <i>Initial Statement All</i> bankruptcy petition.	out an Eviction	Judgment Against You (Form 101A) and file it as par	t of this			

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Det	otor 1 Harris, Yvette M.			Case number (if known)				
_			v					
Par	Report About Any Bus	sinesses	You Own as a Sole Propr	1etor				
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	Go to Part 4.				
		☐ Yes.	Name and location of	business				
	A sole proprietorship is a							
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if a	Name of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach it		Number, Street, City,	State & ZIP Code				
	to this petition.	box to describe your business:						
			☐ Health Care Bu	usiness (as defined in 11 U.S.C. § 101(27A))				
			☐ Single Asset R	eal Estate (as defined in 11 U.S.C. § 101(51B))				
			☐ Stockbroker (a					
			☐ Commodity Bro					
			☐ None of the ab	ove				
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?  If you are filing under Chapter 11, the court must know whether you are a small business debtor, you must attach your most recent b operations, cash-flow statement, and federal income tax return or if any of these documents do not U.S.C. 1116(1)(B).				e a small business debtor, you must attach your most recent balance sheet, statement of				
	For a definition of small	■ No.	I am not filing under C	hapter 11.				
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chap Code.	ter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy				
		☐ Yes.	I am filing under Chap	ter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.				
Par	t 4: Report if You Own or	Have Any	Hazardous Property or A	Any Property That Needs Immediate Attention				
14.	Do you own or have any property that poses or is	■ No.						
	alleged to pose a threat of imminent and identifiable hazard to public health or	☐ Yes.	What is the hazard?	<del></del>				
	safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?	?				
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			Where is the property?	Number Steat City State 9 7in Code				
				Number, Street, City, State & Zip Code				

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Deb	tor 1 Harris, Yvette M.		_		Case number (if known)
Pari	t 5: Explain Your Efforts t	o Rec	ceive a Briefing About Credit Counseling		
		Abo	out Debtor 1:	Ab	out Debtor 2 (Spouse Only in a Joint Case):
15.	Tell the court whether	You	ı must check one:	Yo	u must check one:
	you have received a briefing about credit counseling.		I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.	** <b>-</b>	I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.
	The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You		Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.		Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.
	must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.		I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have certificate of completion.	a a e <sup>177</sup>	I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.
	If you file anyway, the court can dismiss your case, you will lose whatever filling fee		Within 14 days after you file this bankruptcy petition you MUST file a copy of the certificate and payment plan, if any.		Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.
-	you paid, and your creditors can begin collection activities again.		I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.		I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.
			To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this	9	To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.
			case.  Your case may be dismissed if the court is		Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.
			dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed,		If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.
			if any. If you do not do so, your case may be dismissed.  Any extension of the 30-day deadline is granted only	. ::	Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.
			for cause and is limited to a maximum of 15 days.  I am not required to receive a briefing about credit counseling because of:		I am not required to receive a briefing about credit counseling because of:
			Incapacity. I have a mental illness or a mental deficienc that makes me incapable of realizing or mak rational decisions about finances.		Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
			Disability.  My physical disability causes me to be unab to participate in a briefing in person, by phone or through the internet, even after I reasonably tried to do so.	<b>)</b> ,	Disability.  My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
			Active duty. I am currently on active military duty in a military combat zone.		Active duty. I am currently on active military duty in a military combat zone.
			If you believe you are not required to receive a briefir about credit counseling, you must file a motion for waiver credit counseling with the court.	ig	If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 Harris, Yvette M.			Case num	ber (if known)			
Par		ons for Re	eporting Purposes					
<b>Apriles</b>	What kind of debts do you have?	16a.	Are your debts primarily	consumer debts? Consumer debts are dersonal, family, or household purpose."	fined in 11 U.S.C.§ 101(8) as "incurred by an			
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.		business debts? Business debts are debts at or through the operation of the business or				
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you	owe that are not consumer debts or business	s debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapt	ter 7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and	Yes.		. Do you estimate that after any exempt prope able to distribute to unsecured creditors?	erty is excluded and administrative expenses are			
	administrative expenses are paid that funds will be		■ No					
	available for distribution to unsecured creditors?		Yes	i.				
18.	How many Creditors do you estimate that you	■ 1-49 □ 50-99		☐ 1,000-5,000 ☐ 5001-10,000	☐ 25,001-50,000 ☐ 50,001-100,000			
	owe?	☐ 100-1 ☐ 200-9	99	10,001-25,000	☐ More than100,000			
19.	How much do you estimate your assets to	□ \$0 - \$	50,000 01 - \$100,000	☐ \$1,000,001 - \$10 million ☐ \$10,000,001 - \$50 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion			
	be worth?		001 - \$500,000	□ \$50,000,001 - \$100 million	□ \$10,000,000,001 - \$50 billion			
		\$500,	001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion			
20.	How much do you estimate your liabilities to	□ \$0 - \$		☐ \$1,000,001 - \$10 million	\$500,000,001 - \$1 billion			
	be?		001 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion			
			001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion			
Par	t7: Sign Below							
For	you	I have ex	amined this petition, and I de	eclare under penalty of perjury that the inform	ation provided is true and correct.			
				er 7, I am aware that I may proceed, if eligible available under each chapter, and I choose to	e, under Chapter 7, 11,12, or 13 of title 11, Unite proceed under Chapter 7.			
			rney represents me and I did ained and read the notice req		an attorney to help me fill out this document, I			
		I request	relief in accordance with the	e chapter of title 11, United States Code, sp	pecified in this petition.			
		case car	and making a false statemen result in fines up to \$250.00	nty concealing property, or obtaining money or obtaining money or obtaining money or obtaining money or bot	r property by fraud in connection with a bankruptcy h. 18 U.S.C. §§ 152, 1341, 1519, and 3571.			
			M. Harris of Debtor 1	Signature of Det	otor 2			
		Executed	on May 7, 2018	Executed on				
			MM / DD / YYYY		MM / DD / YYYY			

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Debtor 1 Harris, Yvette M.		Cas	e number (if known)
For your attorney, if you are represented by one	Chapter 7, 11, 12, or 13 of title 11, United State	es Code, and have explained	ormed the debtor(s) about eligibility to proceed under the relief available under each chapter for which the
If you are not represented by an attorney, you do not need to file this page.			ce required by 11 U.S.C. § 342(b) and, in a case in ry that the information in the schedules filed with the
. •	/s/ Michael R. Richmond	Date	May 7, 2018
	Signature of Attorney for Debtor		MM / DD / YYYY
	Michael R. Richmond		
	Printed name		
	Heller & Richmond, Ltd. Firm name		
	33 N Dearborn St Ste 1907		
	Chicago, IL 60602-3828		
	Number, Street, City, State & ZIP Code		
	Contact phone (312) 781-6700	Email address	mrichmond@hellerrichmond.com
	3124632		
	Par number & State		

Case 18-13403 Doc 1 Filed 05/08/18 Entered 05/08/18 08:35:57 Desc Main Document Page 8 of 51 Fill in this information to identify your case and this filing: Debtor 1 Yvette M. Harris Middle Name Last Name First Name Debtor 2 Middle Name (Spouse, if filing) First Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? ☐ No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply Single-family home Do not deduct secured claims or exemptions. Put 142 Sundance Rd the amount of any secured claims on Schedule D: Duplex or multi-unit building Creditors Who Have Claims Secured by Property. Street address, if available, or other description Condominium or cooperative Manufactured or mobile home Current value of the Current value of the IL 60443-1285 Matteson Land entire property? portion you own? City State ZIP Code \$180,000.00 Investment property \$180,000.00 Timeshare Describe the nature of your ownership interest ☐ Other (such as fee simple, tenancy by the entireties, or a life estate), if known. Who has an interest in the property? Check one

Debtor 1 only

Debtor 2 only

property identification number: 142 Sundance Road Matteson, II 60443

Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

Other information you wish to add about this item, such as local

**Fee Simple** 

(see instructions)

Check if this is community property

Official Form 106A/B Schedule A/B: Property page 1

Cook

County

Case 18-13403 Doc 1 Filed 05/08/18 Entered 05/08/18 08:35:57 Desc Main Page 9 of 51 Case number (if known) Document Debtor 1 Harris, Yvette M. If you own or have more than one, list here: 1.2 What is the property? Check all that apply Single-family home Do not deduct secured claims or exemptions. Put 3063 Nottingham Ave the amount of any secured claims on Schedule D: Duplex or multi-unit building Street address, if available, or other description Creditors Who Have Claims Secured by Property. Condominium or cooperative Manufactured or mobile home Current value of the Current value of the Markham IL 60428-4609 Land entire property? portion you own? City State ZIP Code Investment property \$40,000.00 \$40,000.00 Timeshare Describe the nature of your ownership interest Other (such as fee simple, tenancy by the entireties, or a life estate), if known. Who has an interest in the property? Check one Debtor 1 only Joint tenant Debtor 2 only County Debtor 1 and Debtor 2 only Check if this is community property At least one of the debtors and another (see instructions) Other information you wish to add about this item, such as local property identification number: Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages \$220,000,00 you have attached for Part 1. Write that number here......>> Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Chevrolet Who has an interest in the property? Check one 3 1 Make: the amount of any secured claims on Schedule D: Camaro Debtor 1 only Creditors Who Have Claims Secured by Property. Model 2015 Year: Debtor 2 only Current value of the Current value of the 20000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another \$25,000.00 \$25,000.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages

you have attached for Part 2. Write that number here.....=>

Current value of the portion you own?
Do not deduct secured claims or exemptions.

\$25,000.00

Dr	ebtor 1	Case			Doc 1	Filed 05/08/18 Document	Page 10 of 51	8 08:35:57	Desc Main
		Harris,						number (ii known)	
	Example No	old goods a es: Major ap Describe	pliance			na, kitchenware			
	<b>—</b> 163.	Describe		furnitur	<u></u>				\$1,000.00
									<u> </u>
	_ No	es: Televisio	g cell p			tereo, and digital equipn ia players, games	nent; computers, printers, sca	nners; music collec	ctions; electronic devices
	<b>—</b> 103.	Describe		1 cell p	hone, 1 co	mputer,			\$500.00
					,	,		<u> </u>	
	Example  No		s and fi ons, me		aintings, print , collectibles	ts, or other artwork; bool	ks, pictures, or other art objec	ts; stamp, coin, or	baseball card collections; other
	Example  No	instrum	photogi ents			her hobby equipment; bi	cycles, pool tables, golf clubs	, skis; canoes and	kayaks; carpentry tools; musical
	☐ Yes.	Describe							
	Firearm Examp		, rifles,	shotguns	, ammunition	, and related equipmen	t		
		Describe							
	■ No	les: Everyd		hes, furs, I	eather coats,	designer wear, shoes, a	accessories		
	☐ Yes.	Describe							
	■ No	les: Everyd		elry, costur	me jewelry, er	ngagement rings, weddi	ng rings, heirloom jewelry, wa	tches, gems, gold,	silver
	☐ Yes.	Describe							
	Examp  ■ No	m animals les: Dogs, of Describe	cats, bi	irds, horse	es				
	■ No	Give specif				i did not already list, ii	ncluding any health aids yo	u did not list	
		•							
15				-		om Part 3, including a	ny entries for pages you ha	ive attached for	\$1,500.00
Pa	rt 4: Des	scribe Your	Financ	ial Assets					
					iitable intere	est in any of the follow	ing?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16	Cash								
٠٠.		les: Money	you ha	ve in your	wallet, in your	r home, in a safe depos	t box, and on hand when you	file your petition	

■ No

De	btor 1	Case 18-1 Harris, Yvette	Do	05/08/18 cument F	Page 11 of $51_{\rm c}$	3/18 U8:35:57 sase number (if known)	Desc Main
	П Удс						
	Deposi	its of money oles: Checking, sav	rings, or other financial accounts	s; certificates of dep	posit; shares in credit	unions, brokerage hou	ses, and other similar
	□ No ■ Yes		, you have manple account m	Institution nar			
	— 100						***
_			17.1. Checking Accoun	nt Northern I	rust Bank		\$1,000.00
18.	Examp		r publicly traded stocks nvestment accounts with brokera	age firms, money m	narket accounts		
	■ No □ Yes		Institution or issuer nar	me:			
		ublicly traded storenture	ck and interests in incorporate	ed and unincorpo	orated businesses, in	ncluding an interest i	in an LLC, partnership, and
	☐ Yes.	Give specific info	rmation about them Name of entity:		•	% of ownership:	
	Negoti Non-ne ■ No	<i>iable instrument</i> s ir	rate bonds and other negotiab nature personal checks, cashiers nts are those you cannot transfer mation about them Issuer name:	s' checks, promiss	ory notes, and money		
		nent or pension a ples: Interests in IF	accounts RA, ERISA, Keogh, 401(k), 403(	(b), thrift savings a	ccounts, or other pen	sion or profit-sharing լ	plans
	Yes.	List each account					
			Type of account: 401(k) or Similar Plan	Institution nan			\$211,215.00
			Pension Plan	Northern T	rust		\$202,369.00
	Your sl		repayments deposits you have made so that vith landlords, prepaid rent, publi				, or others
	_			Institution nar	ne or individual:		
23.	Annuiti ■ No	ies (A contract for	a periodic payment of money to	you, either for life c	or for a number of year	s)	
	☐ Yes	lss	uer name and description.				
			n IRA, in an account in a qualif 29A(b), and 529(b)(1).	fied ABLE progra	m, or under a qualifi	ed state tuition prog	ram.
	☐ Yes	Ins	titution name and description. Se	eparately file the re	cords of any interests	.11 U.S.C. § 521(c):	
	■ No	•	re interests in property (other	r than anything li	sted in line 1), and ri	ghts or powers exer	cisable for your benefit
	☐ Yes.	Give specific info	rmation about them				
			demarks, trade secrets, and or in names, websites, proceeds fro				

☐ Yes. Give specific information about them...

De	ebtor 1	Harris	, Yvette M.		Document	Page 12 o	of 51 Case number (if known)	
27.	Examp  ■ No	les: Buildi				oldings, liquor lic	enses, professional licenses	
M			owed to you?					Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	■ No	unds owe	-	about them, includin	g whether you already	riled the returns	and the tax years	
29.	■ No	les: Past	due or lump su		support, child suppo	rt, maintenance,	divorce settlement, property	settlement
	Examp  ■ No	les: Unpa unpa	•	ility insurance payme ade to someone els		s, sick pay, vaca	tion pay, workers' compensat	ion, Social Security benefits;
	Interest Examp ■ No	t <b>s in insu</b> bles: Healt	rance policies h, disability, or li insurance comp				owner's, or renter's insurance	Surrender or refund
	If you a died.  No	re the ber		ng trust, expect prod	neone who has died eeds from a life insur		re currently entitled to receive (	value: property because someone has
	Examp  ■ No	les: Accid		ent disputes, insura	nave filed a lawsuit nce claims, or rights		and for payment	
	■ No		t and unliquid		y nature, including	counterclaims	of the debtor and rights to s	et off claims
35.	■ No		sets you did no	,				
36					Part 4, including an		ges you have attached for	\$414,584.00
Pa	rt 5: Des	scribe Any	Business-Relat	ed Property You Owi	n or Have an Interest I	n. List any real es	state in Part 1.	
	Do you o		e any legal or ed	quitable interest in ar	y business-related pr	operty?		

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☐ Yes. Go to line 38.

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Debt	tor 1	Harris, Yvette M.		Document	Page 13 of	Case number (if known)	
Part		scribe Any Farm- and Comme ou own or have an interest in fa			or Have an Interes	t In.	
46. <b>D</b>	o you	own or have any legal or	equitable int	terest in any farm- or co	ommercial fishing	-related property?	
	No.	Go to Part 7.					
	☐ Yes.	. Go to line 47.					
Part	7:	Describe All Property You (	Own or Have a	an Interest in That You Did	Not List Above		
		have other property of an les: Season tickets, country					
		Give specific information					
54.	Add tl	he dollar value of all of yo	ur entries fro	om Part 7. Write that nu	mber here		\$0.00
Part	8:	List the Totals of Each Part of	of this Form				
55.	Part 1	: Total real estate, line 2					\$220,000.00
56.	Part 2	2: Total vehicles, line 5			\$25,000.00		
57.	Part 3	3: Total personal and hous	ehold items,	, line 15	\$1,500.00		
58.	Part 4	l: Total financial assets, lir	ne 36		\$414,584.00		
59.	Part 5	i: Total business-related p	roperty, line	: 45	\$0.00		
60.	Part 6	: Total farm- and fishing-r	elated prope	erty, line 52	\$0.00		
61.	Part 7	: Total other property not	listed, line 5	j4 + <u> </u>	\$0.00		
62.	Total	personal property. Add lin	es 56 througl	h 61	\$441,084.00	Copy personal property to	tal <b>\$441,084.00</b>

\$661,084.00

Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

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		1707011111		
Fill in this infor	mation to identify your	case:		
Debtor 1	Yvette M. Harris			
	First Name	Middle Name	Last Name	)
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, EASTERN DIVISIO	<u>N</u>
Case number				☐ Check if this is a
( <del>)</del>				amended filing

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

	Part 1:	Identify the Property You Claim as Exempt
--	---------	---

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption.	
142 Sundance Rd	\$180,000.00	\$15,000.00	735 ILCS 5/12-901
Matteson IL, 60443-1285 County: Cook Line from Schedule A/B 1.1		□ 100% of fair market value, up to any applicable statutory limit	
Chevrolet Camaro	\$25,000.00	\$2,400.00	735 ILCS 5/12-1001(c)
2015 20000 Line from <i>Schedule A/B</i> : 3.1		□ 100% of fair market value, up to any applicable statutory limit	
furniture Line from Schedule A/B. <b>6.1</b>	\$1,000.00	\$1,000.00	735 ILCS 5/12-1001(b)
Line Holli Schedule A/D. G.1		100% of fair market value, up to any applicable statutory limit	
1 cell phone, 1 computer, Line from Schedule A/B. 7.1	\$500.00	\$500.00	735 ILCS 5/12-1001(b)
Line non constant 772. FT		☐ 100% of fair market value, up to any applicable statutory limit	
Northern Trust Bank	\$1,000.00	\$1,000.00	735 ILCS 5/12-1001(b)
LINE HOLL SCHEUUIE A/D. 11.1		100% of fair market value, up to any applicable statutory limit	

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Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption.	
Northern Trust Line from Schedule A/B: 21.1	\$211,215.00	□ 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1006
Northern Trust Line from Schedule A/B: 21.2	\$202,369.00	□	735 ILCS 5/12-1006
<ul> <li>Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every 3</li> <li>No</li> </ul>			
☐ Yes. Did you acquire the property covere ☐ No	ed by the exemption within	n 1,215 days before you filed this case?	

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Fill in this information to	o identify your	case:				
Debtor 1 Yve	tte M. Harris					
First N		Middle Name	Last Name		}	
Debtor 2						
(Spouse if, filing) First N	lame	Middle Name	Last Name			
United States Bankruptcy	Court for the:	NORTHERN DISTRICT OF ILI	LINOIS. EAST	ERN DIVISION		
Critica Ciatos Bariniapisy	Court for the					
Case number						
(if known)					☐ Check	if this is an
					amend	ded filing
Official Form 106	D					
Official Form 106						
Schedule D: C	reditors	Who Have Claims	Secured	d by Propert	У	12/15
		two married people are filing togeth number the entries, and attach it to				
1. Do any creditors have cla	ims secured by	your property?				
☐ No. Check this box	and submit this	s form to the court with your other s	chedules. You	have nothing else to re	port on this form.	
Yes. Fill in all of the		•		<b>9</b>		
Tes. Fill in all of the	e information be	eiow.				
Part 1: List All Secure	ed Claims			Column A	Column B	Column C
for each claim. If more than	one creditor has	ore than one secured claim, list the cre a particular claim, list the other creditors al order according to the creditor 's nan	s in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion
2.1 BMOHarris Banl	k	Describe the property that secures	the claim:	\$19,689.00	\$180,000.00	\$19,689.00
Creditor's Name		142 Sundance Rd, Matteson	n, IL			
		60443-1285	,			
		142 Sundance Road Mattes	on, II			
PO Box 2035		60443				
Milwaukee, WI		As of the date you file, the claim is: apply.	Check all that			
53201-2035		Contingent				
Number, Street, City, State	e & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the debt? Chec	ck one.	Nature of lien. Check all that apply.				
Debtor 1 only		☐ An agreement you made (such as	mortgage or sec	cured		
Debtor 2 only		car loan)				
Debtor 1 and Debtor 2 on	ıly	☐ Statutory lien (such as tax lien, me	chanic's lien)			
☐ At least one of the debtor		☐ Judgment lien from a lawsuit				
☐ Check if this claim relat	es to a	Other (including a right to offset)	3rd Mortga	ige		
community debt						
Date debt was incurred		Last 4 digits of account num	ber 9940			
		<u> </u>				
2.2 Bmoharrisbk		Describe the property that secures	the claim:	\$26,388.00	\$180,000.00	\$26,388.00
Creditor's Name		142 Sundance Rd, Matteson	n. IL			<del></del>
		60443-1285	,			
		142 Sundance Road Mattes	on, II			
		60443				
PO Box 94934		As of the date you file, the claim is: apply.	Check all that			
Palatine, IL 6006	69	Contingent				
Number, Street, City, State	e & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the debt? Chec	ck one.	Nature of lien. Check all that apply.				
Debtor 1 only		lacksquare An agreement you made (such as	mortgage or sec	cured		
Debtor 2 only		car loan)				
Debtor 1 and Debtor 2 on	ıly	☐ Statutory lien (such as tax lien, me	chanic's lien)			
☐ At least one of the debtor	s and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relat	es to a	Other (including a right to offset)	2nd mortga	age		

Official Form 106D

community debt

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Debtor 1 Yvette M. Harris		Case number (f know)		
First Name Middle N	ame Last Name			
Date debt was incurred 2005-12-28	Last 4 digits of account number 0594			
2.3 Gm Financial	Describe the property that secures the claim:	\$23,215.00	\$25,000.00	\$0.00
Creditor's Name	2015 Chevrolet Camaro	<u> </u>	<del>+20,000.00</del>	40.00
	As of the date you file, the claim is: Check all that			
PO Box 181145	apply.			
Arlington, TX 76096-1145	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or se car loan)	cured		
Debtor 2 only				
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another  Check if this claim relates to a	☐ Judgment lien from a lawsuit			
community debt	Other (including a right to offset) auto loan			
Date debt was incurred 2016-02-27	Last 4 digits of account number 7065			
2.4 Newpennfin-shellpointm	Describe the property that secures the claim:	\$157,638.00	\$40,000.00	\$117,638.00
Creditor's Name	3063 Nottingham Ave, Markham, IL		<del>Ψ 10,000100</del>	<u>Ψ111,000.00</u>
	60428-4609			
75 Beattie PI Ste 300	As of the date you file, the claim is: Check all that			
Greenville, SC	apply.			
29601-2138	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.			
■ Debtor 1 only	☐ An agreement you made (such as mortgage or se	cured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset) Morggage	•		
Date debt was incurred 2006-11	Last 4 digits of account number 3721			
2.5 Northern Trust, NA	Describe the property that secures the claim:	\$221,990.00	\$180,000.00	\$41,990.00
Creditor's Name	142 Sundance Rd, Matteson, IL			
	60443-1285			
	142 Sundance Road Matteson, II 60443			
	As of the date you file, the claim is: Check all that			
PO Box 92992	apply.			
Chicago, IL 60675-2992	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only	☐ An agreement you made (such as mortgage or se	cured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
Check if this claim relates to a community debt	Other (including a right to offset)  Morggage			
Date debt was incurred 2003-08-04	Last 4 digits of account number 0001			

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Debtor 1	Yvette M. Harris			Case number (if know)	
	First Name	Middle Name	Last Name		

Add the dollar value of your entries in Column A on this page. Write that number here: \$448,920.00
If this is the last page of your form, add the dollar value totals from all pages.
Write that number here: \$448,920.00

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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		Document	Page 1	9 of 51	_	
Fill in tl	his information to identify your ca	ase:				
Debtor	1 Yvette M. Harris					
	First Name	Middle Name	Last Name		}	
Debtor 2 (Spouse if		Middle Name	Last Name			
(Opouse II	, illing)					
United S	States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILI	_INOIS, EAS	FERN DIVISION		
Case nu	umber					
(if known)						Check if this is an
					a	amended filing
Officia	al Form 106E/F					
	dule E/F: Creditors W	ho Have Unsecured	Claims			12/15
ny exec schedule o: Credit he Conti	mplete and accurate as possible. Use utory contracts or unexpired leases to G: Executory Contracts and Unexpir ors Who Have Claims Secured by Pro nuation Page to this page. If you have ther (if known).	hat could result in a claim. Also li ed Leases (Official Form 106G). D perty. If more space is needed, co	st executory c o not include a ppy the Part yo	ontracts on Schedule A/B: any creditors with partially s ou need, fill it out, number th	Property (Official secured claims the entries in the	al Form 106A/B) and on that are listed in Schedule boxes on the left. Attach
Part 1:	List All of Your PRIORITY Uns	ecured Claims				
1. Do a	any creditors have priority unsecured	claims against you?				
<b>I</b>	No. Go to Part 2.					
	es.					
Part 2:	List All of Your NONPRIORITY	Unsecured Claims				
3. Do a	any creditors have nonpriority unsecu	red claims against you?				
	No. You have nothing to report in this pa	rt. Submit this form to the court with	your other sche	dules.		
<b>■</b> Y	es.					
unse	all of your nonpriority unsecured claicecured claim, list the creditor separately one creditor holds a particular claim, list	for each claim. For each claim listed	, identify what t	ype of claim it is. Do not list cl	laims already inc	luded in Part 1. If more
						Total claim
	ADVOCATE MEDICAL GROU	JP Last 4 digits of acc	ount number	1430		\$384.00
	Nonpriority Creditor's Name <b>c/o United recovery Service</b>	When was the debt	incurred?	2017		
	18525 Torrence Ave	Whom was the dobt	illouil ou i	2011		_
	Lansing, IL 60438-2871	<del></del>				
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you	file, the claim	is: Check all that apply		
	Debtor 1 only	Пол				
	Debtor 2 only	☐ Contingent ☐ Unliquidated				
	Debtor 2 only  Debtor 1 and Debtor 2 only	<u> </u>				
	☐ At least one of the debtors and anot	☐ Disputed her Type of NONPRIOR	NTY unsecure	d claim:		
	☐ Check if this claim is for a comm	_				
	debt Is the claim subject to offset?	unity		aration agreement or divorce t	that you did not	
	■ No	' ' '		ng plans, and other similar del	bts	
	Yes	Other. Specify				
	55	Uther, Specify				_

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Case number (f know)

Debtor 1 Harris, Yvette M. 4.2 \$640.00 **Amex Dsnb** Last 4 digits of account number 1346 Nonpriority Creditor's Name When was the debt incurred? 2009-03 9111 Duke Blvd Mason, OH 45040-8999 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Revolving account ☐ Yes 4.3 ATG CREDIT, LLC. Last 4 digits of account number 4873 \$104.00 Nonpriority Creditor's Name When was the debt incurred? PO BOX 14895 Chicago, IL 60614 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans  $\square$  Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify loan 4.4 **ATT WIRELINE** Last 4 digits of account number 1001 \$403.00 Nonpriority Creditor's Name When was the debt incurred? 2014-02 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Open account

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Harris, Yvette W.		Case number (if know)	
Comenitybank/victoria	Last 4 digits of account number	2740	\$285.00
Nonpriority Creditor's Name	When was the debt incurred?	2016-09	
PO Box 182789		2010 03	
Columbus, OH 43218-2789			
	As of the date you file, the claim i	s: Check all that apply	
_	Пол		
_	_ '		
•	•	d claim:	
	<u></u>	J Claim.	
	_	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	ration agreement of arvorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Other. Specify Revolving	account	
CONSULTANTs in Clinical			
Pathology	Last 4 digits of account number	9314	\$7.00
Nonpriority Creditor's Name	When was the debt incurred?		
PO Box 5979	when was the dept incurred:	<del></del>	
Carol Stream, IL 60197-5979	_		
	As of the date you file, the claim i	s: Check all that apply	
_	_		
	_		
_	Unliquidated		
•	Disputed		
	<u></u>	d claim:	
	_		
Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
■ No		g plans, and other similar debts	
∏ Yes	Other Specify medical se	rvices	
	— Other. Specify		
Little Company of Mary Hospita	Last 4 digits of account number	1202	\$244.00
Horipholity Ground of Hame	When was the debt incurred?	2016-02	
Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
_	Пол		
, , , , , , , , , , , , , , , , , , ,	_		
<u> </u>	•	d claim:	
	<u></u>	a Oldini.	
☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	adion agreement of divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other Specify Open acco	unt	
	Comenitybank/victoria  Nonpriority Creditor's Name  PO Box 182789 Columbus, OH 43218-2789  Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Yes  CONSULTANTs in Clinical Pathology Nonpriority Creditor's Name  PO Box 5979 Carol Stream, IL 60197-5979  Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Yes  Little Company of Mary Hospita  Nonpriority Creditor's Name  Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Yes	Comenitybank/victoria   Comenitybank/victoria   Nonpriority Creditor's Name   When was the debt incurred?	Comenitybank/victoria Nonpriority Creditor's Name PO Box 182789 Columbus, OH 43218-2789 Number Street City State 2ip Code Who incurred the debt? Check one.    Debtor 1 and Debtor 2 only   Debtor 2 only   Debtor 2 only   Debtor 3 and Debtor 2 only   Debtor 3 and Debtor 2 only   Debtor 1 and Debtor 2 only

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Case number (if know) Debtor 1 Harris, Yvette M. 4.8 \$640.00 **MACYS American Express** Last 4 digits of account number 1346 Nonpriority Creditor's Name When was the debt incurred? c/o United Recovery System PO Box 722910 Houston, TX 77272-2910 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify revolving charge ☐ Yes 4.9 **Minute Clinic of Illinois** Last 4 digits of account number 1652 \$59.00 Nonpriority Creditor's Name When was the debt incurred? C/O Transworld Systems 500 Virginia Dr Fort Washington, PA 19034-2707 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans  $\square$  Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify medical services 4.10 **QUEST DIAGNOSTICS Inc.** Last 4 digits of account number \$26.00 5801 Nonpriority Creditor's Name c/o AMCA When was the debt incurred? 2017 PO Box 1235 Elmsford, NY 10523-0935 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed  $\square$  At least one of the debtors and another Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify medical bills ☐ Yes

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Case number (f know)

	mairis, i v	ette ivi.		Od3C I	Idilibe		
	ears/Cbna		Last 4 digits of account numb	er <u>6312</u>	!		\$596.00
INC	onpriority Crea	itor's Name	When was the debt incurred?	2006	-03		
	O Box 628						
Si	ioux Falls,	<b>SD 57117-6283</b> City State ZIp Code	As of the data you file the ale	im io. Chaal	call that	t apply	
		he debt? Check one.	As of the date you file, the cla	im is: Check	Call tha	Гарріу	
	Debtor 1 only		☐ Contingent				
_	Debtor 2 only		☐ Unliquidated				
		l Debtor 2 only	☐ Disputed				
	_	of the debtors and another	Type of NONPRIORITY unsect	ured claim:			
_	_	s claim is for a community	☐ Student loans	nou olulli.			
	ebt	s claim is for a community	Obligations arising out of a s	eparation ac	ıreemer	nt or divorce that you did not	
Is	the claim sub	ject to offset?	report as priority claims		,	,	
	No		Debts to pension or profit-sh	aring plans,	and oth	er similar debts	
	] Yes		Other. Specify Revolvir	ig accou	nt		
U	NIVERSIT	Y OF CHICAGO					
4.12 <b>M</b>	ledicine		Last 4 digits of account numb	er 2443	}	<u></u>	\$1,417.00
No	onpriority Cred	itor's Name	When was the debt incurred?				
33	3343 Colle	ctions Center Dr	when was the debt incurred:				
С	hicago, IL	60699					
		City State ZIp Code	As of the date you file, the cla	im is: Check	all that	apply	
	_	he debt? Check one.	_				
	Debtor 1 only		Contingent				
_	Debtor 2 only		Unliquidated				
		Debtor 2 only	Disputed				
		of the debtors and another	Type of NONPRIORITY unsect	ıred claim:			
	Check if thisebt	s claim is for a community	☐ Student loans				
		ject to offset?	Obligations arising out of a s report as priority claims	eparation ag	reemer	nt or divorce that you did not	
	No		Debts to pension or profit-sh	aring plans,	and oth	er similar debts	
	] Yes		Other. Specify medical	bills			
D 10							
			bt That You Already Listed				
is trying that	to collect from re than one co	n you for a debt you owe to s reditor for any of the debts th	about your bankruptcy, for a debt that omeone else, list the original creditor at you listed in Parts 1 or 2, list the ac	r in Parts 1 o	or 2, the	en list the collection agency	here. Similarly, if you
	-	in Parts 1 or 2, do not fill out					
I C Syste			On which entry in Part 1 or Part 2 did : Line <b>4.4</b> of ( <i>Check one</i> ):	_	-	creditor? rs with Priority Unsecured Clair	ne
PO Box			Ellio <u>III el (ellesk elle).</u>	_		rs with Nonpriority Unsecured (	
Saint Pa	iul, MN 551	164-0378				is with Nonphonty Onsecured V	Siaiiris
			Last 4 digits of account number	1(	001		
Name and A	Address		On which entry in Part 1 or Part 2 did	you list the o	riginal o	creditor?	
	nts Credit (		Line 4.7 of (Check one):	Part 1:	Credito	rs with Priority Unsecured Clair	ns
	ackson Blv o, IL 60606-			Part 2:	Credito	rs with Nonpriority Unsecured (	Claims
Omcago	, IL 00000	0300	Last 4 digits of account number	1:	202		
Part 4:	Add the Am	nounts for Each Type of U	nsecured Claim				
6. Total the		certain types of unsecured cla	aims. This information is for statistica	al reporting	purpos	ses only. 28 U.S.C. §159. Add	the amounts for each
						Total Claim	
	6a.	Domestic support obligation	ns	6a.	\$	0.00	
Total claim		Tayon and cortain other data	te you awa tha gavernment	e h	_		-
from Part	<b>1</b> 6b.	Taxes and certain other deb	is you owe the government	6b.	\$_	0.00	

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ebtor 1 Harris, Y	vette M.	Case r	number (if kno	ow)
6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
6e.	<b>Total Priority.</b> Add lines 6a through 6d.	6e.	\$	0.00
				Total Claim
6f.	Student loans	6f.	\$	0.00
n Part 2 6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
6h	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	4,805.00
6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	4,805.00

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		DUGIIIIE	III PAUE /3 0131	
Fill in this infor	mation to identify your	case:		
Debtor 1	Yvette M. Harris			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS, EASTERN DIVISION	
Case number				
(if known)				

## Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person o	r company wit Name, Numb	h whom you have the o	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<del></del>
2.2					
	Name				
	Number	Street			_
	-0.4		0	710.0	<del>_</del>
2.3	City		State	ZIP Code	
	Name				_
	Number	Street			_
	City		State	ZIP Code	<del>-</del>
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	<del>-</del>
2.5		•			
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	<del>_</del>

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		Docume	ent Page 26 d	151	
Fill in this i	information to identify your	case:			
Debtor 1	Yvette M. Harris				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	g) First Name	Middle Name	Last Name		
(Spouse II, IIIII)	g) Filst Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, EASTER	N DIVISION	
Case numb (if known)	er				☐ Check if this is an amended filing
Sched	Form 106H ule H: Your Cod		s you may have Re as	complete and accurate	12/15 as possible. If two married people
are filing tog and number case numbe	gether, both are equally resp r the entries in the boxes on er (if known). Answer every o	onsible for supplying co the left. Attach the Addit question.	rrect information. If mo ional Page to this page	ore space is needed, co . On the top of any Add	py the Additional Page, fill it out, litional Pages, write your name and
1. Do y	ou have any codebtors? (If y	ou are filing a joint case, do	o not list either spouse as	a codebtor.	
■ No □ Yes					
	in the last 8 years, have you nia, Idaho, Louisiana, Nevada,				states and territories include Arizona,
	Go to line 3. Did your spouse, former spou	se, or legal equivalent live w	vith you at the time?		
line 2 a	ngain as a codebtor only if th Schedule E/F (Official Form	at person is a guarantor	or cosigner. Make sure	you have listed the cre	with you. List the person shown in editor on Schedule D (Official Form e E/F, or Schedule G to fill out
	Column 1: Your codebtor lame, Number, Street, City, State and Z	IP Code		Column 2: The cree Check all schedule	ditor to whom you owe the debt s that apply:
3.1				☐ Schedule D. line	<u>.</u>
	Name			☐ Schedule E/F, li	<del></del>
				☐ Schedule G, line	e
	Number Street City	State	ZIP Code	_	
3.2				☐ Schedule D, line	
	Name			Schedule E/F, line    Schedule E/F, line   Schedule G, line	ne
<u> </u>	Number Street			_	
	City	State	ZIP Code		

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Eill	in this information to identif	v vour co	20.								
		te M. Ha									
_	btor 2					_					
Uni	ited States Bankruptcy Cou	rt for the:	NORTHERN DISTRIC	CT OF ILLINOIS, EAST	ERN	_					
(lf kr	se number nown)						☐ An ☐ A s		d filing	g postpetition oving date:	chapter 13
<u>O</u>	fficial Form 106	<u> </u>					MN	// DD/ Y	YYY		
S	chedule I: You	r Inco	me								12/1
sup spo atta	as complete and accurate plying correct information use. If you are separated that a separate sheet to this the correct of the	n. If you a and your s form. Or oyment	re married and not filing spouse is not filing with	g jointly, and your sp h you, do not include	ouse is informa	living ation a	with you	u, includ ur spou	de informa se. If more	ation about ye e space is ne	our eded,
1.	Fill in your employment information.			Debtor 1			1	Debtor 2	or non-fi	ling spouse	
	If you have more than one		Employment status	■ Employed			ļ	☐ Emple	oyed		
	attach a separate page wi information about addition employers.		Occupation	☐ Not employed			l	□ Not e	mployed		
	Include part-time, season self-employed work.	al, or	Employer's name	NORTHERN TRU	IST BA	NK					
	Occupation may include homemaker, if it applies.	student or	Employer's address	50 S La Salle St Chicago, IL 6060	3-1008	3					
			How long employed th	nere? 31 years	<b>S</b>			_			
Pai	Give Details Ab	out Mont	hly Income								
	mate monthly income as	of the dat	e you file this form. If yo	ou have nothing to repo	rt for an	y line, v	write \$0 i	n the spa	ace. Includ	e your non-filir	ng spouse
	u or your non-filing spouse l ce, attach a separate sheet t			oine the information for	all empl	oyers fo	or that pe	erson on	the lines b	elow. If you ne	eed more
						F	or Debt	or 1		btor 2 or ng spouse	
2.	List monthly gross wag deductions). If not paid m				2.	\$_	7,1	66.00	\$	N/A	
3.	Estimate and list month	ly overtin	ne pay.		3.	+\$_		0.00	+\$	N/A	-
4.	Calculate gross Income	. Add line	2 + line 3.		4.	\$	7 166	3.00	\$	N/A	

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Debt	or 1	Harris, Yvette M.	_	С	ase r	number ( <i>if knov</i>	vn)				
					For	Debtor 1			ebtor 2 or iling spouse	e	
	Col	py line 4 here	4.	-	\$	7,166.0	00	\$	N/		
5.	List	t all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$	1,998.0	00	\$	N.	/A	
	5b.	Mandatory contributions for retirement plans	5b.		<u>*</u> —	0.0		\$ <u> </u>		A A	
	5c.	Voluntary contributions for retirement plans	5c.		\$ —	0.0		\$	N/		
	5d.	Required repayments of retirement fund loans	5d.		\$	0.0	00	\$	N/	/A	
	5e.	Insurance	5e.		\$	248.0	00	\$	N.	/A	
	5f.	Domestic support obligations	5f.		\$	0.0	00	\$	N/		
	5g.	Union dues	5g.		\$	0.0	00	\$		<u>/A</u>	
	5h.	Other deductions. Specify:	5h.	.+	\$	0.0	00	+ \$	N	<u>/A</u>	
6.	Add	d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	9	₿	2,246.0	00	\$	N/	Ά	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	(	₿	4,920.0	00	\$	N/	Ά	
8.	List 8a.	t all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.		\$	0.0	00	\$	N	/A	
	8b.	Interest and dividends	8b.		\$ 	0.0		\$		<u>/A</u>	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	_	\$ \$	0.0		\$		/A	
	8d.	Unemployment compensation	8d.		\$	0.0	00	\$	N.	/A	
	8e.	Social Security	8e.		\$_	0.0	00	\$	N/	/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.		\$	0.0	00	\$	N.	/A	
	8g.	Pension or retirement income	8g.		\$	0.0		\$		/A	
	8h.	Other monthly income. Specify:	8h.	.+	\$	0.0	00	+ \$	N/	<u>'A</u>	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		0.0	00	\$		N/A	
10	Cal	culate monthly income. Add line 7 + line 9.	10.	Φ.		+,920.00	\$		N/A = \$		920.00
10.		If the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ <u> </u>		1,920.00	Ψ-			_ <del>,</del>	920.00
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your der friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not avecify:	epende						<i>le J.</i> 11. +\$ _		0.00
12.		d the amount in the last column of line 10 to the amount in line 11. The rest te that amount on the Summary of Schedules and Statistical Summary of Certain								4, bined	920.00
13.	Do	you expect an increase or decrease within the year after you file this form' No. Yes. Explain:	?								ncome

Official Form 106I Schedule I: Your Income page 2

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Fill	in this information to identify your case:			
Deb	tor 1 Yvette M. Harris		Check if this is:	
			An amended filing	
	tor 2buse, if filing)	L	<ul> <li>A supplement show expenses as of the</li> </ul>	wing postpetition chapter 13 following date:
Unit	ed States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLING	OIS,	MM / DD / YYYY	
	e number nown)			
	fficial Form 106J			
	chedule J: Your Expenses			12/15
info (if k	as complete and accurate as possible. If two married people are prmation. If more space is needed, attach another sheet to this formum.  Answer every question.			
Par 1.	t 1: Describe Your Household Is this a joint case?			
	■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate household?			
	No ☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses to	for Separate Householdof De	ebtor 2.	
2.	Do you have dependents? ■ No			
۷.	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
	Do not state the			□ No
	dependents names.			☐ Yes
				□ No
				Yes
				□ No □ Yes
				☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents? ■ No ☐ Yes			
exp	t 2: Estimate Your Ongoing Monthly Expenses imate your expenses as of your bankruptcy filing date unless yourness as of a date after the bankruptcy is filed. If this is a supple blicable date.			
valı	lude expenses paid for with non-cash government assistance if your long such assistance and have included it on Schedule I: Your long significant form 1061.)		Your exp	penses
		'		
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	clude first mortgage	ł. \$	1,962.00
	If not included in line 4:			
	4a. Real estate taxes	4a	a. \$	0.00
	4b. Property, homeowner's, or renter's insurance	41	o. \$	0.00
	4c. Home maintenance, repair, and upkeep expenses		. \$	0.00
5	4d. Homeowner's association or condominium dues		d. \$ 5. \$	700.00
5.	Additional mortgage payments for your residence, such as hom	ie equity ivalis 5	ν. φ	700.00

Dept	Harris, YV	ette M. Cas	se num	ber (if known)		
6.	Utilities:					
		eat, natural gas	6a.	\$	450.00	
	•	r, garbage collection	6b.		150.00	
	·	cell phone, Internet, satellite, and cable services	6c.	\$	0.00	
	6d. Other. Spec		6d.	\$	0.00	
	Food and housek	·	7.	\$	400.00	
		Idren's education costs	8.	\$	0.00	
		, and dry cleaning	9.	\$	200.00	
	-	ducts and services	10.	\$		
	•		11.	\$	200.00	
	Medical and dent	•	11.	Φ	0.00	
	T <b>ransportation.</b> If Do not include car	clude gas, maintenance, bus or train fare.	12.	\$	350.00	
		ubs, recreation, newspapers, magazines, and books	13.	\$	0.00	
		outions and religious donations	14.	· <del></del>	0.00	
	Insurance.	dutions and rengious denations	17.	Ψ	0.00	
		rance deducted from your pay or included in lines 4 or 20.				
	15a. Life insurand		15a.	\$	0.00	
	15b. Health insur	ance	15b.	·	0.00	
	15c. Vehicle insu		15c.	\$	130.00	
	15d. Other insura		15d.	·	0.00	
		ude taxes deducted from your pay or included in lines 4 or 20.			0.00	
	Specify:	,	16.	\$	0.00	
	<b>Installment or lea</b> 17a. Car paymen	• •	17a.	\$	450.00	
	17b. Car paymen		17b.	\$	0.00	
	17c. Other. Spec		17c.	\$	0.00	
	17d. Other. Spec		17d.	·	0.00	
	•	f alimony, maintenance, and support that you did not report as	17 u.	Ψ	0.00	
		ur pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00	
		ou make to support others who do not live with you.		\$	0.00	
	Specify:	• • • • • • • • • • • • • • • • • • • •	19.	-		
	· · ·	ty expenses not included in lines 4 or 5 of this form or on Schedule	I: You	r Income.		
	20a. Mortgages o	n other property	20a.	\$	1,300.00	
	20b. Real estate t	axes	20b.	\$	0.00	
	20c. Property, ho	meowner's, or renter's insurance	20c.	\$	0.00	
		e, repair, and upkeep expenses	20d.	\$	0.00	
	20e. Homeowner	s association or condominium dues	20e.	\$	0.00	
	Other: Specify:			+\$	0.00	
					0.00	
	Calculate your me					
	22a. Add lines 4 th	S .		\$	6,292.00	
	22b. Copy line 22	monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$		
	22c. Add line 22a a	nd 22b. The result is your monthly expenses.		\$	6,292.00	
23.	Calculate your me	onthly net income.				
	-	(your combined monthly income) from Schedule I.	23a.	\$	4,920.00	
		onthly expenses from line 22c above.	23b.	·	6,292.00	
		- · · · · · · · · · · · · · · · · · · ·			3,232.00	
	23c. Subtract vol.	r monthly expenses from your monthly income.				
		your monthly net income.	23c.	\$	-1,372.00	
		•				
	Do you expect an increase or decrease in your expenses within the year after you file this form?  For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a					
		rms of your mortgage?	-3~9~ F	,	200.0000 0000000 01 0	
	■ No.					
	_	Explain here:				

Fill in this inform	nation to identify your (	case:			
Debtor 1	Yvette M. Harris			·	
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, EASTERN D	IVISION	•
Case number					
(if known)					☐ Check if this is an amended filing
If two married peo	ople are filing together,	, both are equally respon te bankruptcy schedules n connection with a bank	Debtor's Schasible for supplying correct or amended schedules. Maruptcy case can result in fir	information.	
Sign	Below				
Did you pay	or agree to pay some	one who is NOT an attor	ney to help you fill out bank	kruptcy forms?	
■ No					
☐ Yes. N	lame of person		····		Petition Preparer's Notice, gnature (Official Form 119)
X Yvetta Signatur	M. Harris of Debtor 1	that I have read the sum	mary and schedules filed w  X Signature of De		
Date	И́ау 7, 2018		Date		

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		Docume	<u>ni Pane 37 0151</u>		
Fill in this infor	mation to identify your	case:			
Debtor 1	Yvette M. Harris				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION		ISION	
Case number (if known)					☐ Check if this is an amended filing

## Official Form 106Sum

### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

-			
Par	t 1: Summarize Your Assets		
		Your a	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	220,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	441,084.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	661,084.00
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	448,920.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e &chedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j & chedule E/F	\$	4,805.00
	Your total liabilities	\$	453,725.00
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedule I	\$	4,920.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	6,292.00
Par	Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other.	her schedu	les.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a per purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C§ 159.	ersonal, fan	nily, or household
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this bo	x and subn	nit this form to the

court with your other schedules.

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Page 33 of 51 Case number (if known) Debtor 1 Harris, Yvette M.

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 8. 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

7,166.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	1
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

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Fil	l in th	nis informa	tion to identify your	case:			
De	btor 1	1	Yvette M. Harris				
ما	btor 2	<b>,</b>	First Name	Middle Name	Last Name		
	ouse if,		First Name	Middle Name	Last Name	<del></del>	
Un	ited S	States Bank	ruptcy Court for the:	NORTHERN DISTRICT OF	FILLINOIS, EASTERN DIV	SION	
	ise nu inown)	ımber					Check if this is an amended filing
St	ate	mplete and	of Financial A	Affairs for Individ	filing together, both are e	qually responsible for supp	4/1
info	rmat	ion. If mo	re space is needed, a every question.	ttach a separate sheet to thi	s form. On the top of any	additional pages, write you	r name and case numbe
Pa	rt 1:	Give De	tails About Your Mar	ital Status and Where You L	ived Before		
1.	Wha	at is your o	current marital status	?			
		Married					
		Not marrie	ed				
2.	Dur	ing the las	t 3 years, have you li	ved anywhere other than wh	nere you live now?		
		No					
		Yes. List a	all of the places you live	ed in the last 3 years. Do not in	clude where you live now.		
	De	btor 1 Prio	r Address:	Dates Debtor 1 liv	ved Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. stat				er live with a spouse or legal fornia, Idaho, Louisiana, Neva			
		No					
		Yes. Make	sure you fill out Schee	dule H: Your Codebtors (Offici	al Form 106H).		
Pa	rt 2	Explain	the Sources of Your	Income			
4.	Filli	in the total	amount of income you	ployment or from operating received from all jobs and all we income that you receive tog	businesses, including part-	time activities.	ndar years?
		No Yes. Fill in	n the details.				
				Debtor 1		Debtor 2	
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross Income (before deductions and exclusions)

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Debtor 1 Harris, Yvette M.			rris, Yvet	tte M.								
5.	Include income regardless of whethe other public benefit payments; pension				ou receive any other income during this year or the two previous calendar years?  e income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployublic benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery e filing a joint case and you have income that you received together, list it only once under Debtor 1.							
	List e	each s	ource and t	the gross inco	me from each source separa	tely. Do not include income that y	you listed in line 4.					
		No										
	=		Fill in the de	etails.								
					Debtor 1 Sources of income Describe below.	Gross Income from each source (before deductions and exclusions)	Debtor 2 Sources of Inc Describe below		Gross Income (before deductions and exclusions)			
			1 of curre iled for ba	nt year until nkruptcy:	wages	\$28,400.00						
			dar year: December	31, 2017 )	wages	\$94,000.00						
			iar year be December		wages	\$88,017.00	•					
Do	rt 3:	1 104	Cortoin Be	numanta Vau	Made Before You Filed for	Pankruptov						
6.	_	either No.	Neither D	ebtor 1 nor D	s debts primarily consume bebtor 2 has primarily cons personal, family, or househol	umer debts. Consumer debts a	are defined in 11 L	J.S.C. § 101	(8) as "incurred by an			
			□ No.	Go to line 7	•	you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?						
			□ Yes			id a total of \$6,425* or more in o	ne or more navme	nts and the i	total amount you paid tha			
				creditor. Do payments to	o not include payments for do o an attorney for this bankrup	omestic support obligations, su	ch as child suppo	rt and alimo				
	_		•	-				guouricit.				
	_	Yes.			r both have primarily cons re you filed for bankruptcy, d	id you pay any creditor a total of	\$600 or more?					
			■ No.	Go to line 7	<b>7.</b>							
			□ <sub>Yes</sub>		or domestic support obligatio	id a total of \$600 or more and th ns, such as child support and al	•	•				
	Cre	ditor	s Name an	d Address	Dates of payr	nent Total amount paid	Amount you still owe	Was this	payment for			
7.	<i>Inside</i>	<i>er</i> s in h you	clude your r are an offic	relatives; any g er, director, pe	eneral partners; relatives of a	e a payment on a debt you ow any general partners; partnership 10% or more of their voting secund de payments for domestic suppo	os of which you are ities; and any mar	e a general p naging agent	artner; corporations of , including one for a			
		No										
			List all payn	nents to an ins	sider.							
	Insi	der's	Name and	Address	Dates of payr	nent Total amount paid	Amount you still owe	Reason 1	or this payment			
8.	With	in 1 y	ear before	you filed for	bankruptcy, did you make	any payments or transfer an	y property on ac	count of a	debt that benefited an			

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Debt	or 1	Harris, Yvette M.			Case number(if known)			
-	insid includ	er? de payments on debts guaranteed or c	osigned by an insider.					
i		No .						
1		Yes. List all payments to an insider						
	Insi	der's Name and Address	Dates of paym	ent	Total amount paid	Amount you still owe	Reason for this include creditor	
Part	4:	Identify Legal Actions, Repossess	ions, and Foreclosu	ıres	·			
ı	Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?  List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modern and contract disputes.							
. [		No						
1		Yes. Fill in the details.						
	Case title Case number		Nature of the	:ase	Court or agency		Status of the case	
		ech Financial v. Harris	mortgage		Circuit Court of Cook		Pending	
	2017 CH 08041		foreclosure		County, IL 50 W Washington St		On appeal	
					Chicago, IL 60		☐ Concluded	
] 	No. Go to line 11.  Yes. Fill in the information below.							Value of the
	Creditor Name and Address		Describe the F	Describe the Property			Date	
			Explain what I	nappened				
	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?  No							
j	_	Yes. Fill in the details.						
	Creditor Name and Address Describe the action			iction the c	take creditor took Date		action was	Amount
	Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?							
ı		No						
l		Yes						
Part	5:	List Certain Gifts and Contribution	ns					
13. \	With	in 2 years before you filed for bank	ruptcy, did you give	any gifts v	vith a total value o	of more than \$600	per person?	
		No						
		Yes. Fill in the details for each gift.	Dogoriba	Aba missa		Data		Malua
	pers		·	uie gins		Date: the g	s you gave ifts	Value
		son to Whom You Gave the Gift and ress:	1					

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Del	otor 1	Harris, Yvette M.	Case	e number(if known)	
14	\Mithi:	n 2 yaare hafara yay filad far hank	ruptcy, did you give any gifts or contributions wi	th a total value of more than \$	200 to any charity?
14.		No Yes. Fill in the details for each gift or c		ui a totai vaide oi more tilali şi	oo to any charty r
	Gifts more Char	or contributions to charities that than \$600 rity's Name ress (Number, Street, City, State and ZIP Co	total Describe what you contributed	Dates you contributed	Value
Par	t 6:	List Certain Losses			
15.		n 1 year before you filed for bankro mbling?	uptcy or since you filed for bankruptcy, did you k	ose anything because of theft,	fire, other disaster,
	_ `	No Yes. Fill in the details.			
		ribe the property you lost and the loss occurred	Describe any insurance coverage for the loss include the amount that insurance has paid. List properties of the properti		Value of property los
Par	t 7:	List Certain Payments or Transfer	rs		····
16.	consu	ulted about seeking bankruptcy or	uptcy, did you or anyone else acting on your beha preparing a bankruptcy petition? reparers, or credit counseling agencies for services re		y to anyone you
		No			
	<b>=</b> 1	es. Fill in the details.			
	Addr Emai	on Who Was Paid ress il or website address on Who Made the Payment, if Not '	Description and value of any property transferred  You	Date payment or transfer was made	Amount o paymen
		er & Richmond, Ltd.	USC	03/17/2018,	\$650.00
		I Dearborn St Ste 1907 cago, IL 60602-3828		and 05/07/2018	·
17.	promi		uptcy, did you or anyone else acting on your behaditors or to make payments to your creditors? you listed on line 16.	alf pay or transfer any propert	y to anyone who
	<b>I</b>	No			
		es. Fill in the details.			
	Pers Addr	on Who Was Paid ress	Description and value of any property transferred	Date payment or transfer was made	Amount o paymen
18.	transi Includ	ferred in the ordinary course of yo	s made as security (such as the granting of a security		
	_	No			
		Yes. Fill in the details.			
	Addr		property transferred p	Describe any property or payments received or debts paid in exchange	Date transfer was made
	Pers	on's relationship to you			
19.	Withi	n 10 years before you filed for ban	kruptcy, did you transfer any property to a self-se	ettled trust or similar device of	which you are a

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De	htor 1 Harris, Yvette M.			Case nu	mber (if known)	
	beneficiary? (These are often called asset-prot ■ No □ Yes. Fill in the details.	rection devices.)				
	Name of trust	Description and	I value of the pro	operty tran	sferred	Date Transfer was
						made
	t 8: List of Certain Financial Accounts, Ins					
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, assoc No  Yes. Fill in the details.	r other financial accou	ınts; certificates	of deposit	-	
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 y cash, or other valuables?	ear before you filed fo	r bankruptcy, a	ny safe dep	oosit box or other depos	sitory for securities,
	■. No					
	☐ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had a Address (Number and ZIP Code)		Describe	the contents	Do you still have it?
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?					
	■ No					
	Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has of to it? Address (Number and ZIP Code)		Describe	the contents	Do you still have it?
Pai	t 9: Identify Property You Hold or Control	for Someone Else				
23.	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.					
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City Code)		Describe	the property	Value
Pai	rt 10: Give Details About Environmental Info	ormation				
For	the purpose of Part 10, the following definition	ons apply:				
	Environmental law means any federal, state, toxic substances, wastes, or material into the controlling the cleanup of these substances	e air, land, soil, surfac	julation concern e water, ground	ning pollution	on, contamination, relea ther medium, including	ses of hazardous or statutes or regulations
	Site means any location, facility, or property own, operate, or utilize it, including disposal	as defined under any	environmental	law, wheth	er you now own, operat	e, or utilize it or used to

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous

material, pollutant, contaminant, or similar term.

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Del	otor 1	Harris, Yvette M.		Case number(if known)	
				<del></del>	
24.	Has	any governmental unit notified you that	you may be liable or potentially liable un	der or in violation of an environm	nental law?
		No			
	<b>⊔</b>	Yes. Fill in the details.	Consequence and all units	Facility and all laws 16 con-	Data of motion
		ne of site Iress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have	you notified any governmental unit of a	ny release of hazardous material?		
		No Yes. Fill in the details.			
		ne of site Iress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have	you been a party in any judicial or admi	inistrative proceeding under any environ	nmental law? Include settlements	and orders.
		No			
		Yes. Fill in the details.			
		e Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Pai	t 11:	Give Details About Your Business or C	onnections to Any Business		
27	18/ish	in 4 years before you filed for bankruptc	y did you own a husiness or have any o	of the following connections to an	v husiness?
٠,,	with	☐ A sole proprietor or self-employed in			y business i
		☐ A member of a limited liability compa		·	
			iny (CCC) or infinited hability partitership (	LLF	
		☐ A partner in a partnership			
		☐ An officer, director, or managing exec	·		
		☐ An owner of at least 5% of the voting	or equity securities of a corporation		
		No. None of the above applies. Go to Pa	ırt 12.		
		Yes. Check all that apply above and fill i	n the details below for each business.		
		siness Name Iress	Describe the nature of the business	Employer Identification numl Do not include Social Securit	
		nber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed	y mumber of trine.
28.		iin 2 years before you filed for bankruptc tutions, creditors, or other parties.	y, did you give a financial statement to a	anyone about your business? Inc	lude ali tinancial
		No			
		Yes. Fill in the details below.			
		ne Iress nber, Street, City, State and ZIP Code)	Date Issued		
Pa	rt 12:	Sign Below			
true ban	and krupt	ad the answers on this Statement of Fina correct. I understand that making a false cy case can result in fines up to \$250,000 \$5 152, 1341, 1519, and 3571.	statement, concealing property, or obta	ining money or property by fraud	
		M. Harris	Signature of Debtor 2		
Ć.		)	Data		
Dā	re [	May 7, 2018	Date	<del></del>	

Official Form 107

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Debtor 1	Harris, Yvette	VI.	Case number (if known)	
•	ttach additional pag	jes to Your Statement of Financial Affairs for In	dividuals Filing for Bankruptcy (Official Form 10	07)?
No.				
☐ Yes				
Did you pa	ay or agree to pay	someone who is not an attorney to help you fill	out bankruptcy forms?	
■ No				
☐ Yes Na	ame of Person	Attach the Bankruntcy Petition Preparer's Notice	Declaration and Signature (Official Form 119)	

Official Form 107

ADVOCATE MEDICAL GROUP c/o United recovery Service 18525 Torrence Ave Lansing, IL 60438-2871

Amex Dsnb 9111 Duke Blvd Mason, OH 45040-8999

ATG CREDIT, LLC. PO BOX 14895 Chicago, IL 60614

BMOHarris Bank PO Box 2035 Milwaukee, WI 53201-2035

Bmoharrisbk PO Box 94934 Palatine, IL 60069

Comenitybank/victoria PO Box 182789 Columbus, OH 43218-2789

CONSULTANTs in Clinical Pathology PO Box 5979 Carol Stream, IL 60197-5979

Gm Financial PO Box 181145 Arlington, TX 76096-1145

I C System Inc PO Box 64378 Saint Paul, MN 55164-0378

MACYS American Express c/o United Recovery System PO Box 722910 Houston, TX 77272-2910

Merchants Credit Guide 223 W Jackson Blvd Ste 7 Chicago, IL 60606-6908

Minute Clinic of Illinois C/O Transworld Systems 500 Virginia Dr Fort Washington, PA 19034-2707

Newpennfin-shellpointm 75 Beattie Pl Ste 300 Greenville, SC 29601-2138

Northern Trust, NA PO Box 92992 Chicago, IL 60675-2992 QUEST DIAGNOSTICS Inc. c/o AMCA PO Box 1235 Elmsford, NY 10523-0935

Sears/Cbna PO Box 6283 Sioux Falls, SD 57117-6283

UNIVERSITY OF CHICAGO Medicine 33343 Collections Center Dr Chicago, IL 60699

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## United States Bankruptcy Court Northern District of Illinois, Eastern Division

IN RE:		Case	No
Harris, Yvette M.		Char	oter <u>7</u>
	Debtor(s)	•	-
	VERIFICATION OF CRED	ITOR MATRIX	
			Number of Creditors17
The above-named Debtor(s) he  Date: May 7, 2018	reby verifies that the list of creditors i	strue and correct to t	he best of my (our) knowledge.
	Debtor		
	Joint Debtor		

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Fill in this inforr	nation to identify your case:		
Debtor 1	Yvette M. Harris	Lost Name	
Debtor 2	First Name Middle Name	Last Name	
(Spouse if, filing)	First Name Middle Name	Last Name	
United States Ba	nkruptcy Court for the: NORTHERN DIS	STRICT OF ILLINOIS, EASTERN DIVISION	
Case number			•
(if known)			☐ Check if this is an
			amended filing
Official Fo	rm 108		
Stateme	nt of Intention for Indi	viduals Filing Under Chapter	r 7 12/15
			-
	vidual filing under chapter 7, you must fi	ll out this form if:	
	e claims secured by your property, or sed personal property and the lease has n	at avaigad	
You must file this	s form with the court within 30 days after	you file your bankruptcy petition or by the date set for	the meeting of creditors,
whiche the for		e time for cause. You must also send copies to the cre	ditors and lessors you list on
			tion. Both dobtons much sime
	ople are filing together in a joint case, bo te the form.	th are equally responsible for supplying correct inforn	lation. Both deptors must sign
Re se complete s	and accurate as nossible. If more snace is	needed, attach a separate sheet to this form. On the to	op of any additional pages.
	our name and case number (if known).	, incourage and a copulate chees to allo form on the	, p • · · · · · , · · · · · · · · · · · · ·
Part 1: List Y	our Creditors Who Have Secured Claims		
			Calal Farms (AAAD). Sill in Aba
1. For any credit information be		: Creditors Who Have Claims Secured by Property (Of	
Identify the cr	editor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
	and in the later later is the state of the s	SECTION AND AND AND AND AND AND AND AND AND AN	20:200/4 0:20-2
Creditor's C	am Financial	Company to the property	□ No
name:	m Financiai	☐ Surrender the property. ☐ Retain the property and redeem it.	□ NO
		Retain the property and enter into a Reaffirmation	■ Yes
Description of	2015 Chevrolet Camaro	Agreement.	
property securing debt:		Retain the property and [explain]:	
0000g 000			
0	1 Carlo Dan Indon		_
Creditor's N	lewpennfin-shellpointm	☐ Surrender the property. ☐ Retain the property and redeem it.	■ No
name.		Retain the property and enter into a Reaffirmation	☐ Yes
Description of	3063 Nottingham Ave, Markham, IL 60428-4609	Agreement.	
property securing debt:	•	Retain the property and [explain]:	
securing debt.			
		_	_
	Northern Trust, NA	☐ Surrender the property.	□ No
name:		☐ Retain the property and redeem it.  ■ Retain the property and enter into a Reaffirmation	Yes
Description of		Agreement.	
property	60443-1285	☐ Retain the property and [explain]:	
securing debt			
Official Form 108	Statement of	Intention for Individuals Filing Under Chapter 7	page

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Debtor 1 Harris, Yvette M.	Case number(if known)
·	
Part 2: List Your Unexpired Personal Property Lease	
	ed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in expired leases are leases that are still in effect; the lease period has not yet ended. You e trustee does not assume it. 11 U.S.C. § 365(p)(2).
Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name:	□ No .
Description of leased Property:	· D Yes
	163
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name:	. □ No
Description of leased Property:	. ☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated	my intention about any property of my estate that secures a debt and any personal
property that is subject to an unexpired lease.	
X Yugud M Harris	X Signature of Debtor 2
Yvette M. Harris Signature of Debtor 1	Signature of Deptor 2
Date May 7, 2018	Date

 $_{\rm B201B~(Form~2}\mbox{Gase,18-13403}$ 

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# Northern District of Illinois, Eastern Division

IN RE:		Case No
Harris, Yvette M.		Chapter 7
·	Debtor(s)	•

CERTIFICATION OF NOT UNDER § 342(b) OF	TICE TO CONSUMER THE BANKRUPTCY	
Certificate of [Non-Attorn	ney] Bankruptcy Petitio	on Preparer
I, the [non-attorney] bankruptcy petition preparer signing the d notice, as required by § 342(b) of the Bankruptcy Code.	ebtor's petition, hereby ce	rtify that I delivered to the debtor the attached
Printed Name and title, if any, of Bankruptcy Petition Preparer Address:		Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.)
X	responsible person, or	(Required by 11 U.S.C. § 110.)
Certifica	ate of the Debtor	
I (We), the debtor(s), affirm that I (we) have received and read	the attached notice, as req	uired by § 342(b) of the Bankruptcy Code.
Harris, Yvette M.	x	5/08/2018
Printed Name(s) of Debtor(s)	Signature of Debt	tor Date
Case No. (if known)	X Signature of Joint	
	Signature of Joint	t Debtor (if any) Date

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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Case 18-13403

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B201B (Form 201B) (12/09)

### United States Bankruptcy Court Northern District of Illinois, Eastern Division

IN RE:	Case No
Young, Hayward L.	Chapter <u>13</u>
	CE TO CONSUMER DEBTOR(S) HE BANKRUPTCY CODE
Certificate of [Non-Attorney	Bankruptcy Petition Preparer
I, the [non-attorney] bankruptcy petition preparer signing the debt notice, as required by § 342(b) of the Bankruptcy Code.	or's petition, hereby certify that I delivered to the debtor the attached
Printed Name and title, if any, of Bankruptcy Petition Preparer Address:	Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.)
X	(Required by 11 U.S.C. § 110.)
Certificate	of the Debtor
I (We), the debtor(s), affirm that I (we) have received and read the	e attached notice, as required by § 342(b) of the Bankruptcy Code.
Young, Hayward L. Printed Name(s) of Debtor(s)	X Jayron Lyn 5/02/2018 Signature of Debtor Date
Case No. (if known)	X
	Signature of Joint Debtor (if any)  Date

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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B2030 (Form 2030) (12/15)

# United States Bankruptcy Court Northern District of Illinois, Eastern Division

In re	Harris, Yvette M.		Case No.		_
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPEN	NSATION OF ATTOR	RNEY FOR E	EBTOR	
C	ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(bompensation paid to me within one year before the filing e rendered on behalf of the debtor(s) in contemplation of	of the petition in bankruptcy, o	or agreed to be pai	d to me, for services re-	
	For legal services, I have agreed to accept		\$	650.00	
	Prior to the filing of this statement I have received		\$	650.00	
	Balance Due		\$	0.00	
2. T	he source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3. T	he source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4. ■	I have not agreed to share the above-disclosed comper firm.	nsation with any other person u	nless they are mer	nbers and associates of	my law
[	I have agreed to share the above-disclosed compensati copy of the agreement, together with a list of the name				aw firm. A
5. I	n return for the above-disclosed fee, I have agreed to rend	der legal service for all aspects	of the bankruptcy	case, including:	
b. c.	Analysis of the debtor's financial situation, and rendering Preparation and filing of any petition, schedules, statem Representation of the debtor at the meeting of creditors [Other provisions as needed]	nent of affairs and plan which i	may be required;	•	ruptcy;
6. B	y agreement with the debtor(s), the above-disclosed fee of	does not include the following	service:		
		CERTIFICATION		·	
I this ba	certify that the foregoing is a complete statement of any ankruptcy proceeding.	agreement or arrangement for p	payment to me for	representation of the de	ebtor(s) in
Ma	ay 7, 2018	/s/ Michael R. Richi	mond		
Da	nte	Michael R. Richmo	nd		_
		Signature of Attorney Heller & Richmond	, Ltd.		
		33 N Dearborn St S	ite 1907		
		Chicago, IL 60602-	3828	_	
		(312) 781-6700 Fax mrichmond@heller		2	
		Name of law firm	neimonu.com	<del></del>	-

### ATTORNEY-CLIENT AGREEMENT

This Agreement is made this 17th day of March 2018 by and between Heller & Richmond, Ltd. (hereinafter referred to as "Attorney) of 33 N. Dearborn St., Suite 1907, Chicago, IL 60602 and Yvette Harris (hereinafter referred to as "Client") of Matteson IL

WHEREAS, "Client" desires to engage the legal services of "Attorney" to advise and represent "Client" concerning "Client's" desire to seek Bankruptcy relief pursuant to title 11 of the United States Code; and

WHEREAS, "Attorney" desires to provide such legal services to "Client":

IT IS HEREBY AGREED by and between the Parties hereto, in consideration of the mutual covenants contained herein:

#### TERMS OF AGREEMENT

- 1. Professional Legal Services to be Provided.
  - A. Attorney shall provide the following professional legal services for "Client" in the above referenced bankruptcy matter:
    - 1. Analysis of the "Client's" financial situation and rendering advice to the "Client" in determining whether to file a petition in bankruptcy;
    - 2. Preparation and filing of any petition, schedules, statement of affairs, or plan which may be required.
    - 3. Representation of "Client" at the meeting of the creditors and confirmation hearing;
    - 4. Other:
- B. Professional legal services to be provided by "Attorney" to "Client shall not include:
  - 1. Rendering advice or representing any other person or entity related to or a dependent of "Client";
  - Filing a notice of appeal, or prosecuting or defending an appeal of any judicial ruling, except by separate agreement of the parties, hereto; or,
  - Representing "Client" in any other judicial or administrative or alternative dispute resolution proceeding, except by separate agreement of the parties, hereto;
  - 4. The filing of any adversary complaint to determine the dischargability of an otherwise non-dischargeable debt.
- 2. Compensation for Legal Service Provided. "Client" agrees to pay to "Attorney" and "Attorney" agrees to accept from "Client" \$ 650.00 for the performance of these services (hereinafter referred to as "fee") in addition to the costs of approximately three hundred ninety five dollars\*\* (\$395.00)

It is hereby acknowledged that this "fee" has been based upon "Client's" representation that he/she has the following type and number of debts:

- a. -2- secured creditors:
- b. +10 unsecured creditors; (\*UP TO 30 UNSECURED CREDITORS)
- c. -0- priority debts; (GOVT. DEBT INCLUDING STUDENT LOAN IS GENERALLY NOT DISCHARGABLE)

This stated "fee" has been further based upon "Client's representation that he/she has:

- a. -0- law suits pending against him/her,
- b. -0- wage assignments pending against him/her.

"Client" agrees to pay an additional fee of one hundred dollars (\$100.00) for each of the following additional items that have not been disclosed above:

- a. each secured creditor;
- b. each group of up to ten unsecured creditors over the first ten unsecured creditors;
- c. each law suit or wage assignment pending against "Client" at the time the bankruptcy is filed;
- d. "Attorney" notification to the Secretary of State of the bankruptcy in the event "Client"s driving privileges had been previously suspended in accordance with the financial responsibility laws of the State of Illinois

"Client" also acknowledges that the "fee" has been determined based upon the minimal amount of expected work to be performed on this bankruptcy matter, and that if additional legal services, such as representing "Client" in contested matters or adversary proceedings, must be performed, if "Client" fails to attend a meeting of the creditors or any court hearing or if the petition, once prepared, has to be revised due to "Client's" failure to provide complete or accurate information, including but not limited to the list of creditors as referred to in Section 5(f) below or if "Attorney" is forced to take any steps to collect any past due Attorneys fees from "Client", "Client" shall be responsible for additional fees at a rate of two hundred fifty dollars (\$250.00) per hour.

"Client" agrees to pay all fees and court costs as follows:

1. \$ 1045.00 upon the execution of this agreement;

2. Batance due prior to filing, but within 90 days

"Client" acknowledges that "Attorney" is not responsible for filing a petition or initiating any bankruptcy proceeding until "Client" has paid "Attorney" at least \$ 1045.00 and that any monies paid upon the execution of this agreement are non-refundable and are intended to compensate "Attorney" for his time spent in compiling the information necessary to prepare, or other steps towards the preparation of, a petition in bankruptcy:

3. Client Cooperation. "Client" agrees to fully cooperate with "Attorney" in performing professional legal services, including, but not limited to, fully disclosing all of "Client's" potential assets and liabilities, timely appearing at meetings and hearings, promptly returning phone calls from "Attorney" to "Client", promptly communicating any changes in circumstances to "Attorney", including change of employment and change of address, and paying all legal fees and expenses as they become due. "Client" hereby warrants and covenants that he/she has fully disclosed to "Attorney" all known or suspected real property, tangible and intangible personal property, debts, leases contracts, claims in favor of or against "Client" and taxes owed.

4. Termination of Agreement.

A. "Client" may terminate this Agreement with "Attorney" at any time upon written notice to "Attorney". In the event of such termination, "Client" shall pay all legal fees incurred and shall notify "Attorney" in writing, if "Client" desires his/her file turned-over to any person or entity.

B. "Attorney" may terminate this Agreement upon written notice to "Client" for "cause". "Cause shall include, but shall not be limited to

the following:

- 1. "Attorney" learning of "Client's" intention to commit an act that may constitute a bankruptcy crime or fraud or other unlawful conduct, and "Client's" refusal to refrain from such conduct;
- 2. "Client's" failure to promptly pay legal fees or expenses incurred; or
- 3. Any other permissive or mandatory cause to withdraw form the Attorney-Client relationship as provided for in the Code of Professional Responsibility.

### 5. "Client" acknowledgment.

A. "Attorney" has advised "Client" that his/her spouse, if any is jointly liable for many of "Client's" debts that have been incurred, since the time of "Client's" marriage and that "Client's" spouse can be held responsible for these debts, unless the spouse files a joint or separate petition for bankruptcy. "Attorney" has advised "Client" that there would be no additional legal "fee" or court costs to add the "Client's" spouse on a joint petition for bankruptcy, provided that the spouse does not have any creditors other than those upon which "Client's" fee was based.

- B. "Attorney" has advised "Client" that some debts may not be dischargeable and in particular, secured debts or those in which "Client" has pledged some property as collateral against a loan or other financing, are not dischargeable, unless "Client" is willing to return the property, which has been pledged as collateral, to the creditor. "Client" has been further advised that in many instances he/she may retain the property, which has been pledged as collateral, if he/she agree to reaffirm the debt and continue to pay the creditor, as they were bound to do, before the filing of bankruptcy.
- C. "Attorney" has reviewed with "Client" his/her options to file under Chapter 7, Chapter 11 and Chapter 13 of Title 11 of the United States Code and "Client" has elected to proceed under Chapter 7 "Client" is aware that if he/she proceeds with a Chapter 7 then he/she will be required to forfeit any and all property owned in full or in part by "Client" other than those exemptions permitted by statute and in most instances the amount of property entitled to those exemptions is minimal. The property that could be forfeited includes, but is not limited to real estate, cash, bank accounts, household goods and furnishings, appliances, artwork, collections, sports equipment, tools, jewelry, income tax refunds, vehicles or anything else of value or potential value.
- D. "Client" acknowledges that he/she has read both front and back of this agreement and "Attorney" has answered any questions that "Client" may have had about its content.
  - E. "Client" acknowledges receipt of a copy of this agreement at the time of its execution.
- F. It is the obligation of "Client" to supply "Attorney" with a neat, legible and complete list of all creditors of "Client" and for each creditor include their complete name, address, account number and balance owed; also, if that account was referred to a collection agency or lawyer then also include the name, address and account number of the collection agency or lawyer.
- G. "Client" understands that "Attorney's" obligation to represent "Client" will end no later than upon the entry of the Order of Discharge in Bankruptcy and "Client" will be responsible for payment of additional fees at the rate of two hundred dollars (\$200.00) per hour for any service that might be requested after the entry of the Order of Discharge including but not limited to telephone advise, file retrieval, providing copies of any file related documents and issues concerning credit bureau reports, obtaining credit or other forms of credit repair.
- H. "Glient" hereby warrants and covenants that he/she has truthfully and fully disclosed to "Attorney" all known or suspected information requested by any aspect of the entire Bankruptcy Petition and that it is the responsibility of "Glient" to be certain that this information is all accurately displayed in the actual Bankruptcy Petition at the time "Glient" affixes his/her signature(s) thereto:

\*\* costs include the court filing fee of \$335.00, the online prebankruptcy counseling and online debt management class and the 3-bureau credit report of \$60.00 for an individual report or \$70.00 for a joint report for husband and wife.

Heller & Richmond, Ltd.

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(312) 781-6700

HELLER & RICHMOND, LTD. 33 N. Dearborn Street Suite 1907 Chicago, IL 60602

By affixing my signature above, I hereby certify that I have not filed any petition for bankruptcy within the

I AGREE TO ALL THE TERMS CONTAINED IN THIS DOCUMENT

past 8 years, except as otherwise noted as follows:

NONE

YES, I HEREBY INSTRUCT ATTORNEY TO PROVIDE CLIENT WITH A 3-BUREAU CREDIT REPORT and LAGREE TO PAY THE COST OF THIRTY FIVE DOLLARS (\$35.00) per person FOR THE REPORT IN ADDITION TO ALL OTHER FEES. This additional fee must be paid before the Bankruptcy Petition will be filed.